

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          | 48     | 8/2/01   |
| FORMALITY REVIEW          | ST       | 1021   | 09/09/01 |
| RESPONSE FORMALITY REVIEW | AN       | 917    | 12-10-01 |
|                           |          |        |          |

INDEX OF CLAIMS

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Rejected
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Allowed
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Canceled
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Restricted
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Non-elected
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Interference
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Appeal
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Objected

| Claim    | Date |
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| Claim    | Date |
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| Claim    | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here

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Jm 50851  
9/3/01 12/10/01